

Sheet1

[illegible]

AFFIDAVIT

STATE OF WISCONSIN)
Racine COUNTY) SS

Johannes Bernick, being first duly sworn on oath, deposes and states as follows:

1. I am an adult resident of the 22 State Senate District and I am a qualified elector, i.e., either registered to vote or eligible to register and vote.

2. On Apr. 5, 2011 at Town of Burlington Hall, I spoke with an individual who was soliciting passersby to sign a document.

4.

I mis understood what was all about.
It was never said it would be for a recall.

5. Had I not been misled about the purpose or effect of the petition, I would not have signed it. I do not and have not supported efforts to have a recall election held for Senator Witch's seat.

Johannes Bernick
[NAME]

Subscribed and sworn to before me this

28 day of April, 2011

Patricia A. Zamba

Notary Public, State of Wisconsin

My Commission Expires

PATRICIA A. ZAMBA
Notary Public
State of Wisconsin

RECALL PETITION

TO: Wisconsin Government Accountability Board

(official with whom nomination papers or declaration of candidacy for the office is filed)

We, the undersigned qualified electors of the 22nd Wisconsin State Senate District
(jurisdiction or district of officeholder)

petition for the recall of Robert Wirch 22nd District State Senate of Wisconsin
(name of officeholder to be recalled and office)

from office pursuant to Article XIII, Section 12 of the Wisconsin Constitution and §.9.10 of the Wisconsin Statutes.

STATEMENT OF REASON FOR RECALL

(The reason for recall must be stated on petitions for city, village, town, and school district officials. The reason must be related to the official responsibilities of the officeholder. No statement of reason is required to initiate the recall of state, congressional, legislative, judicial, or county officials.)

Refusing to represent the citizens of Wisconsin 22nd State Senate District in Madison.



THE MUNICIPALITY USED FOR MAILING PURPOSES, WHEN DIFFERENT THAN MUNICIPALITY OF RESIDENCE, IS NOT SUFFICIENT. THE NAME OF THE MUNICIPALITY OF RESIDENCE MUST ALWAYS BE LISTED.			
SIGNATURES OF ELECTORS	STREET & NUMBER OR RURAL ROUTE Rural address must also include box or fire no.	MUNICIPALITY OF RESIDENCE Indicate Town, City, or Village	DATE OF SIGNING
1. <u>Peggy S. Weiden</u>	<u>6252 BREVER RD</u> <u>BURLINGTON WI 53105</u>	<input checked="" type="checkbox"/> Town <u>Burlington</u> <input type="checkbox"/> Village <input type="checkbox"/> City	<u>4/5/11</u>
2. <u>John Weiden</u>	<u>6252 BREVER RD</u> <u>Burlington, WI 53105</u>	<input checked="" type="checkbox"/> Town <u>"</u> <input type="checkbox"/> Village <u>"</u> <input type="checkbox"/> City	<u>4/5/11</u>
3. <u>Johannes Bernhoff</u>	<u>1640 Murphy Ave</u>	<input checked="" type="checkbox"/> Town <u>Burlington</u> <input type="checkbox"/> Village <input type="checkbox"/> City	<u>4/5/11</u>
4. <u>Susan Novacek</u>	<u>1823 Landre Ct.</u> <u>Burlington</u>	<input checked="" type="checkbox"/> Town <u>Burlington</u> <input type="checkbox"/> Village <input type="checkbox"/> City	<u>4-5-11</u>
5. <u>Judy Stoltz</u>	<u>29021 Elm Island</u> <u>Madison</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <input type="checkbox"/> City	
6. <u>OW Quaker</u>	<u>30415 Cedar St</u> <u>Burlington WI</u>	<input checked="" type="checkbox"/> Town <u>Burlington</u> <input type="checkbox"/> Village <input type="checkbox"/> City	<u>4/5/11</u>
7. <u>K. DeHt</u>	<u>280 Gardner Ave</u> <u>Burlington WI 53105</u>	<input type="checkbox"/> Town <input type="checkbox"/> Village <u>"</u> <input checked="" type="checkbox"/> City <u>"</u>	<u>4/5/11</u>
8. <u>Michael Cook</u>	<u>2816 Martin Ter</u> <u>Burlington WI 53105</u>	<input checked="" type="checkbox"/> Town <u>"</u> <input type="checkbox"/> Village <u>"</u> <input type="checkbox"/> City	<u>4/5/11</u>
9. <u>Carol R. Roberts</u>	<u>30004 Meccasino</u> <u>Burlington WI</u>	<input checked="" type="checkbox"/> Town <u>"</u> <input type="checkbox"/> Village <u>"</u> <input type="checkbox"/> City	<u>4/5/11</u>
10. <u>Robert M. Fyfe</u>	<u>34415 W Chestnut</u> <u>Burlington WI</u>	<input checked="" type="checkbox"/> Town <u>"</u> <input type="checkbox"/> Village <u>"</u> <input type="checkbox"/> City	<u>4-5-11</u>

Certification of Circulator

I, Sandra Remer, certify:
(name of circulator)

I reside at 30020 Mound Dr. Burlington WI
(circulator's residence - include number, street, and municipality)

I personally circulated this recall petition and personally obtained each of the signatures on this paper. I know that the signers are electors of the jurisdiction or district represented by the officeholder named in this petition. I know that each person signed the paper with full knowledge of its content on the date indicated opposite his or her name. I know their respective residences given. I support this recall petition. I am aware that falsifying this certification is punishable under §.12.13(3)(a), Wis. Stats.

4/5/2011
(date)

Sandra Remer
(signature of circulator)

Please mail this form to:

Recall Wirch

P.O. Box 26 • Silver Lake, WI 53170

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